

Please type a plus sign (+) inside this box → ☐

PTO/SB/122 (8-96)  
 Approved for use through 6/30/99. OMB 0651-0035  
 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

### CHANGE OF CORRESPONDENCE ADDRESS Application

Address to:  
 Assistant Commissioner for Patents  
 Washington, D.C. 20231

|                        |                    |
|------------------------|--------------------|
| Application Number     | 09/759,709         |
| Filing Date            | 01/12/2001         |
| First Named Inventor   | FISCHER            |
| Group Art Unit         | 1638               |
| Examiner Name          | FOX, DAVID T       |
| Attorney Docket Number | P04814USO PHI 1314 |

Please change the Correspondence Address for the above-identified application to:

☐ Customer Number

OR

Type Customer Number here

Place Customer  
 Number Bar Code  
 Label here

|                         |                                     |       |              |     |       |
|-------------------------|-------------------------------------|-------|--------------|-----|-------|
| Firm or Individual Name | PIONEER HI-BRED INTERNATIONAL, INC. |       |              |     |       |
| Address                 | 7100 NW 62ND AVE DARWIN BLDG        |       |              |     |       |
| Address                 | PO BOX 1000                         |       |              |     |       |
| City                    | JOHNSTON                            | State | IA           | ZIP | 50131 |
| Country                 | UNITED STATES                       |       |              |     |       |
| Telephone               | 515-248-4888                        | Fax   | 515-334-6883 |     |       |

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☐ Applicant
- ☐ Assignee of record of the entire interest.  
 Certificate under 37 CFR 3.73(b) is enclosed.
- ☒ Attorney or agent of record.

|                       |                  |
|-----------------------|------------------|
| Typed or Printed Name | LILA A. T. AKRAD |
| Signature             |                  |
| Date                  | 4-9-04           |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.